State Interagency Council for Services to Children with an Emotional Disability
Meeting Summary for October 23, 2013

Members/ Designees Present:
Mary Reinle Begley (DBHDID), SIAC Chair
Eugene Foster (CCSHCN)
Bill Heffron (DJJ)
Peggy Roark (Parent Designee)
Heather Dearing (CHFS/ FRYSC)
Tal Curry (DPH)
Tina Webb (DCBS)
Laura McCullough (KDE)
Catherann Terry (DMS)
Troy Bell (AOC)

Guests:
Dana Nickles (CHFS)
Dr. Allen Brenzel (DBHDID)
Wendy Morris (DBHDID)
Chris Whitsell (Children's Services Dir. /Bluegrass)
Bridget Turner (Children's Services Dir. / KY River CC)
Larry Linden (Children's Services Dir. /North Key CC)
David Weathersby (Children's Services Dir /Seven Counties)
LeAnn Magre (Well Care-MCO)
Steve Shannon (KARP)
Robert Daniels (Seven Counties)
Kristal Hankinson (DPH/ Early Childhood)
Chad Burn (LRC/Comprehend)
Michael Taylor (LRC/ Bluegrass East)
Whitney Hayse (Protection & Advocacy)
Leslie Jones (Protection & Advocacy)

Guests:
Kari Collins (DBHDID)
Natalie Kelly (DBHDID/ KICC)
Amy Cooper-Puckett (DBHDID/KICC)
Beth Potter (KY SEED/ KICC)
Beth Jordan (DBHDID/KICC)
Christopher Duckworth (KY SEED/ KICC
Vestena Robbins (DBHDID/KICC)
Kate Tilton (KPFC)
Carmilla Ratliff (KPFC)
Mark Hertweck (DBHDID)
Lea Taylor (DCBS)
Janice Johnston (DBHDID)
Sue Smith (DBHDID)
Michelle Kilgore (DBHDID)
Kara Fresh (DBHDID/ IMPACT PLUS)

Staff: Martha Campbell, SIAC Administrator (DBHDID) & Meghan Wright, Training Assistant (DBHDID)

Agenda Item	Discussion	Action/Priorities/ Recommendations
Welcome/ Introduction	Mary Reinle Begley, Commissioner of DBHDID and SIAC Chair, called the meeting to order. Members and guests introduced themselves.	**None**
Review of September 25th, 2013 SIAC Meeting Summary	SIAC members reviewed DRAFT summary of the 9/25/2013 SIAC meeting. There were no edits; SIAC approved/ accepted the meeting summary. Commissioner Begley noted that 'action items' and 'recommendations' included in the meeting summary were limited.	**SIAC adopted meeting summary with no changes.**
Cabinet Update: System of Care Re-Design **Dana Nickles, Policy Advisor, Secretary of CHFS**	Ms. Nickles advised SIAC that Secretary Haynes plans to attend the November 13, 2013 SIAC Meeting. **Medicaid Expansion & Pending Changes to KY's Medicaid Plan** ➤ Governor Beshear & Secretary Haynes recommended changing the Kentucky Medicaid State Plan by submitting a State Plan Amendment (SPA) to Health & Human Services (HHS)/ Centers for Medicaid & Medicare (CMS) that recommends expanding the provider network in Kentucky in order to increase access to behavioral health (mental health and substance use) services, expand the array of services and meet the demands of expanding Medicaid. ➤ CMS has not yet approved the SPA submitted by Kentucky; the 'Federal Government Shutdown' caused delays in CMS responding to states. ➤ While waiting on formal notice from CMS, Kentucky Medicaid is proceeding to integrate & operationalize changes in order to be ready by January 1, 2014. ➤ Once CMS approves SPA, KY will then set rates, receive actuarial approval and finalize written regulations that address changes in the state plan. **PEW Foundation and the Juvenile Justice Task Force (JJTF)** ➤ CHFS continues working with the PEW Trust in collaboration with the JJTF. ➤ Identified problem is the lack of services offered and available at the community level; this is in line with one of the primary goals of the SIAC Strategic Plan & Children's Re-alignment of Behavioral Health services across Kentucky (Heather Dearing is leading the effort on the redesign).	**Secretary Haynes to attend 11/13/2013 SIAC**

	Several Focus Areas of the Children's Re-alignment of BH Services	
	Several Focus Areas of the Children's Re-alignment of BH Services ➢ Screening and Assessment Tools o Secretary Haynes recommended a standardized screening and assessment tool (for each age group) to streamline the process and ensure that the screenings and assessments utilized are evidence-based and produce good outcomes. o Heather Dearing, CHFS, is creating an inventory of all screening and assessment tools in use, for children and youth in all age categories; noting the age appropriate tools currently in use. ➢ Points of Excellence for Care Coordination, Supported by the Cabinet o Secretary Haynes is focused on agencies and organizations that provide effective 'Care Coordination'. o Examples of effective 'Care Coordination include the Commission for Children with Special Health Care Needs (CCSHCN) and Kentucky's Department for Public Health (DPH) and the collaborative efforts related to Autism, including the statewide forums being held across the state.	
System of Care "Youth Guided" Care Update- Jessica Krouse (Youth Representative)	**SIAC Youth Representative unable to attend due to transportation.** **SIAC Youth Designee was also unable to attend SIAC.**	**Arrangements made to ensure attendance of Youth Member at 11/13/201 SIAC.**
System of Care "Family Driven" Care Update- Peggy Roark (SIAC Alternate Parent Representative)	**Regional Updates for SIAC's Family Driven Report** ➢ Ms. Roark distributed a report from various regions across the state on Parent Support activities and Family Driven activities. ➢ Ms. Roark asked that SIAC review the report and it will be placed on the 11/13/2013 SIAC agenda for discussion.	**Ms. Roark will review regional parent updates during the November 13, 2013 SIAC meeting.**

Interagency Priorities & Discussion-Synopsis *Priorities 1,2,3*	**Overview of:** ❖ **Kentucky's System of Care (SOC) Redesign** ❖ **System of Care Expansion Implementation Grant-Kentucky Initiative for Collaborative Change (KICC)** ❖ **Using Data to Support Continuous Quality Improvement of Services & Supports to Children, Youth with Behavioral Health Issues** *Also reviewed during 9/25/2013 SIAC Meeting*	
CHFS Initiative to Redesign Services to Children, Youth and Families **Heather Dearing, CHFS/ FRYSCs**	**Kentucky's History with SOC** ➢ Kentucky has a 25 year history with SOC implementation ➢ Each initiative has built upon previous successes and lessons learned ➢ Secretary Haynes charged CHFS with redesigning behavioral health services to children and youth across the state of Kentucky ➢ Secretary Haynes held a state agency partner meeting (SIAC members included) in April of 2013, which resulted in commitments from all partner agencies to begin the work of redesigning services. **Cabinet Lead Efforts Related to Redesigning Services** ➢ Heather Dearing began by taking an inventory of the current work going on within the Cabinet to address the needs of children, youth and families. ➢ Ms. Dearing cross referenced this current activity with the Cabinet and partner agencies recommendations from the April 2013 meeting and incorporated this with the report/ study titled "A Good and Modern System" produced for Kentucky by Shelia Pires (Consultant) ➢ The redesign emphasizes the importance of identifying children/ youth in need or at risk at an earlier age and coordinating care from the beginning of service implementation. ➢ Ms. Dearing's document presents a "play book", not a "plan book". The document design encourages all departments/ agencies/ partners to work as one system and to work from the <u>same "play book"</u> with the <u>same goal</u> and <u>same vision</u> in mind; precisely how we get there is still being determined.	

	Important Questions to Consider (SIAC and all partners)
	➢ What do we want to work on?
	➢ What are the points of excellence within and near the work of the Cabinet that can be utilized moving forward?
	    ○ Family Resource & Youth Services Centers (FRYSCs) are currently an under-utilized program within the schools and have the potential of playing a stronger role in the future related to coordination of the system redesign; particularly as they maintain some neutrality.
	
	<u>Discussion:</u>
	Ms. Roark, Parent SIAC Parent Designee, stated that the biggest problem for many parents is within the schools.
	Ms. McCullough, SIAC Education Designee, stated that the schools want help and support and are focused on a solution to the problem of how to offer children and youth more Behavioral Health services within the school setting and how to get support for this from Medicaid and from the Managed Care Organizations (MCOs).
	LeAnn Magre of Well Care (MCO) stated that her organization recognizes that schools are not responsible for providing all Behavioral Health services to students; specifically, when the need falls outside of what is identified in a students' Individual Education Plan (IEP).
	
	What is a System of Care (SOC)
	A spectrum of effective, community-based services and supports for children and youth with or at-risk of behavioral health or other challenges and their families…
	    ○ *organized into a coordinated network,*
	    ○ *builds meaningful partnerships with families and youth,*
	    ○ *addresses their cultural and linguistic needs*
	…to help them function better at home, school, community, and throughout life.
	
	SOC Values:
	➢ Family-Driven & Youth-Guided
	➢ Culturally & Linguistically-appropriate
	➢ Community-Based
		Meeting scheduled for 10/23/2013 [Medicaid, KDE, DBHDID] to discuss/review covered services to students within a school setting. Update to be provided to SIAC 11/13/2013.

| | **SOC Principles**
➢ Availability and access to a comprehensive array of effective, community-based services and supports
➢ Strength-based, individualized service planning
➢ Evidence-informed and promising practices
➢ Services and supports delivered in the least restrictive, most normative environments possible
➢ Partnerships with families, youth & other caregivers
➢ Cross-agency coordination
➢ Care management
➢ Developmentally appropriate services
➢ Incorporate mental health promotion, prevention, early identification and intervention; accountability, quality improvement, accountability.
➢ Accountability and quality improvement tracking
➢ Protect the rights of children and families
➢ Provide services without discrimination | |
| **System of Care Expansion Implementation Grant-Kentucky Initiative for Collaborative Change (KICC) Beth Potter, Project Director of KY SEED and KICC** | **Kentucky's SOC Expansion Grant Award**
DBHDID received notification, 7/1/13, it was awarded a SAMHSA SOC Expansion Implementation cooperative agreement, Kentucky Initiative for Collaborative Change (KICC)
➢ KICC provides human resource and financial support to further review, prioritize, operationalize, and implement redesign goals across all child-serving agencies
➢ 4 million, four-year cooperative agreement from the Substance Abuse and Mental Health Services Administration (SAMHSA)
➢ Kentucky Initiative for Collaborative Change (KICC)
➢ Cooperative agreement funds support SOC implementation, infrastructure and expansion, not direct-services | |

	KICC Goals	
	➤ Implementing policy, administrative, and regulatory changes	
	➤ Developing or expanding services and supports	
	➤ Creating or improving financing strategies	
	➤ Providing training, technical assistance and coaching	
	➤ Generating support and advocacy base	
	How KICC Supports SIAC	
	➤ Enhance ability of SIAC & RIACs to fulfill their roles as governing bodies	
	➤ Support expansion/sustainability of SOC approach across all child-serving agency partners	
	➤ Provide a framework for all agency redesign efforts	
	What This Means for SIAC	
	➤ Collaboration across agencies, families, and youth	
	➤ Improved services & access; expanded array of coordinated community-based, culturally competent services/supports for children, youth and families	**SIAC [Members/Designees] to attend SOC Training related to Redesign efforts, SOC KICC Grant and SIAC Priorities & Goals.** *Date to be announced.*
	➤ Access to National Advisory Group (NAG) to guide work of SIAC & RIACs	
	Next Steps	
	➤ 2 ½ day SOC Primer training for all members of SIAC	
	➤ Initial meeting of National Advisory Group (NAG) with SIAC members to review recommendations from 4/2013 meeting and integrate KICC work plan	
Using Data to Support Continuous Quality Improvement of Services & Supports to Children, Youth with Behavioral Health Issues	**Using Data to Support Continuous Quality Improvement of Services** **Why Fidelity Assessment Is Important** Research shows that wraparound initiatives with high fidelity implementation demonstrate more positive outcomes.	

Vestena Robbins and Janice Johnston (DBHDID)	**TEAM OBSERVATION MEASURE (TOM)**	
	How Kentucky Is Assessing Wraparound Fidelity ➤ Wraparound process was implemented for children/youth with complex needs and their families in Kentucky over 20 years ago. ➤ KY chose the Team Observation Measure (TOM) on a statewide basis ➤ TOM, developed by the Wraparound Evaluation and Research Team (WERT), is one component of the Wraparound Fidelity Assessment System (WFAS), a multi-method approach to assessing the quality of individualized care planning & management for children/youth/families with complex needs. ➤ TOM is designed to assess adherence to standards of high-quality wraparound during team meeting sessions. ➤ Trained observers rate whether specific indicators are evident during a wraparound team meeting session. ➤ Ratings are translated into a score for each item as well as a total fidelity score for the overall session. ➤ Teams are selected using a systematic random sampling method. ➤ Fidelity data is submitted via an online data entry system within two weeks of completion of the team observation. **How Wraparound Fidelity Assessments Are Used** ➤ Program Improvement: Profiles, organized by the phases/activities and/ or principles of wraparound, can be generated to illuminate areas of relative strength and those in need of improvement. This information can be used to guide program planning, training, coaching, and continuous quality improvement activities. ➤ Individual Family Feedback: Assessment results can provide useful guidance to wraparound teams around the quality of implementation for a specific family; however, great care needs to be taken to ensure confidentiality. ➤ Individual Provider Feedback: Fidelity data can guide practice refinement activities and other coaching efforts for individual wraparound facilitators. ➤ Research: Fidelity data can be linked to child and family outcomes to determine which aspects of the wraparound process are most important to child and family well-being.	

Robert Daniels (Seven Counties)	**PracticeWise**	
	PracticeWise Overview ➢ Methodology: matching guidelines for clinical work to the right populations. ➢ Live, web-hosted database w/over 700 research articles/publications can be queried over 11 problem areas to obtain around 40 practice guidelines. **PracticeWise Evidence-Based Services (PWEBS) Database** ➢ PWEBS is an online application that allows you to explore and understand behavioral health services literature for youth ➢ Users' access searches based on features such as treatment targets, youth characteristics, service characteristics (e.g., settings, protocols, or practices). **Practitioner Guides-Set of materials** ➢ Practice Guides, two-page summaries of the most common procedures drawn from evidence-based practice for youth ➢ Process Guides, 1-page outlines designed to represent core MAP concepts **Clinical Dashboard** ➢ Summarizes evidence relevant to clinical decision making during treatment. ➢ Clinical dashboards may be integrated into health record or outcome management systems. ➢ They may be client-specific or may compare multiple clients or treatment units **Managing & Adapting Practice (MAP)_ Professional Development Program** ➢ MAP helps individuals develop proficiency in selection, organization, delivery of common practices used in evidence-based treatments in order to improve their direct services to clients. ➢ Program offers training for those who wish to provide supervision, consultation, or training to others within their agency. **Direct Service Roles** ➢ User – uses any MAP materials or tools ➢ Supported User – is developing competency with the MAP system by receiving supervision or training ➢ Therapist – demonstrates the core competencies necessary to deliver evidence-informed care using the MAP system ➢ Advanced Therapist – demonstrates high-level proficiency in the delivery of evidence-informed care using the MAP system **Supervisory Roles** ➢ Agency Supervisor – provides supervision and consultation to intra-agency Supported Users ➢ Training Professional – provides supervision and consultation to intra-agency Supported Users; delivers curricula and reviews to produce intra-agency	

	Therapists and Advanced Therapists; may work with a Practicewise Training Partner to produce additional intra-agency Training Professionals	
	Discussion on PractiseWise	
	➢ It can be trusted. Behind each piece is a lot of evidence.	
	➢ More stringent process than regular EBP – by APA standards.	
	➢ Umbrella license; any agency that serves children with behavioral health needs has provider types would be covered by umbrella license.	
	➢ Seven Counties Services has a committee approach to this implementation	
	➢ Practice wise is providing a network to guide working with youth	
	➢ Practice wise brings skills together – versus just being focused on one type of practice; connects practices.	
	➢ What does this mean for more specialized EBP? Practice wise is a generalist model and goes hand in hand with specialized models… that would be used for other needs. This is a compliment to those approaches.	
	➢ Using outcome measures to measure process	
	➢ Screening earlier; then seeking treatment through assessment.	
	Wrap + Map Pilot Briefing:	
	'a shared effort of the National Wraparound initiative (NWI), PracticeWise and the Institute for Innovation & Implementation at the University of MD to coordinate wraparound with evidence-based strategies by applying the resources of the Managing and Adapting Practice system which provides an approach plus an array of tools to support coordinated management in services delivery and the application of EBP resources.'	
	➢ Opportunity to pair wraparound process with MAP process of PracticeWise.	
	➢ Research shows that children/ families receiving wraparound services report increased satisfaction and support; as well as costs savings; however, no change in clinical, functional outcomes.	
	➢ The missing element is effective clinical practice.	
	➢ Kentucky is working to implement 3 pilot programs	
	➢ Future reporting will be presented to the SIAC	

Other Business	➢ KY Department of Education, Laura McCullough, SIAC Designee expressed to Council appreciation for the interagency nature of this SIAC body. Noted that over the past several months the collaborative nature of the council assisted on several issues by connecting the appropriate parties to effectively problem solve. Specifically noted successful meetings related to issues involving provision of school based services, IEPs, Medicaid and MCOs. Education has been invited to participate in a collaborative meeting designed to address identified problems and work toward a resolution.	**DMS & KDE to update SIAC in 11/2013 on 10/23/2013 meeting held to discuss covered services to students within a school setting.**
	➢ Proposed SIAC meeting dates for calendar year 2014 distributed.	**SIAC will address at 11/13/2013 meeting.**
	➢ SIAC Workgroup on committees of the SIAC plans to submit recommendations to the full SIAC in November 2013.	**Workgroup to submit [recommendations for SIACs review] in 11/ 2013.**
	➢ Short term SIAC workgroup requested to draft annual (SIAC) recommendations to the Governor and LRC; noting priorities that SIAC wants to promote during the legislative session. SIAC Volunteers: Heather Dearing, Tal Curry, Peggy Roark, Bill Heffron, Laura McCullough, and a KICC Grant Project Director, Beth Potter.	**SIAC Administrator to schedule by 12/3/2013**
	➢ SIAC subgroup requested to review mapped-out steps for adding a family organization to SIAC; SIAC Volunteers: Tal Curry, Kari Collins, Dr. Eugene Foster, and will request a youth representative and present to SIAC.	**SIAC Administrator will submit to full SIAC for review on 11/13/2013.**
Adjourn	**Motion to adjourn; seconded/approved**	
Next Meeting Date:	**Wednesday, November 13, 2013 from 10:00am to 12:00pm DBHDID/100 Fair Oaks Lane, Conference Rooms A & B/ Frankfort, KY.**	